

SUBMIT: COMPLETED APPLICATION, TAX STATEMENT AND FEE TO:
Bayfield County
Planning and Zoning Depart.
PO Box 58
Washburn, WI 54891
(715) 373-6138

APPLICATION FOR PERMIT
BAYFIELD COUNTY, WISCONSIN

RECEIVED
Date Stamp (Received)

MAR 16 2022

Bayfield Co.
Planning and Zoning Agency

Permit #:	22-1067
Date:	4-29-2022
Amount Paid:	\$150 Res Acc Bldg 3-23-22 JTB
Refund:	

INSTRUCTIONS: No permits will be issued until all fees are paid.
Checks are made payable to: Bayfield County Zoning Department.

DO NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO APPLICANT.

Original Application MUST be submitted

FILL OUT IN INK (NO PENCIL)

TYPE OF PERMIT REQUESTED →		<input checked="" type="checkbox"/> LAND USE		<input type="checkbox"/> SANITARY		<input type="checkbox"/> PRIVY		<input type="checkbox"/> CONDITIONAL USE		<input type="checkbox"/> SPECIAL USE		<input type="checkbox"/> B.O.A.		<input type="checkbox"/> OTHER	
Owner's Name: <u>Bernie Helgeson</u>				Mailing Address: <u>52059 Robinson Lk. Rd.</u>				City/State/Zip: <u>Barnes WI. 54873</u>				Telephone: <u>715-495-1269</u>			
Address of Property: <u>52059 Robinson Lk. Rd.</u>				City/State/Zip: <u>Barnes WI. 54873</u>								Cell Phone:			
Contractor: <u>Path Construction</u>				Contractor Phone: <u>319-455-9001</u>				Plumber:				Plumber Phone:			
Authorized Agent: (Person Signing Application on behalf of Owner(s))				Agent Phone:				Agent Mailing Address (include City/State/Zip):				Written Authorization Attached <input type="checkbox"/> Yes <input type="checkbox"/> No			
PROJECT LOCATION		Legal Description: (Use Tax Statement)						Tax ID# <u>3110</u>		Recorded Document: (Showing Ownership) <u>1067R</u> <u>529675</u>					
<u>SW 1/4, SE 1/4</u>		Gov't Lot		Lot(s)		CSM		Vol & Page		CSM Doc #		Lot(s) #		Block #	
Subdivision:		Section <u>33</u>		Township <u>45</u> N, Range <u>9</u> W		Town of: <u>Barnes</u>		Lot Size		Acreage <u>3.4</u>					

<input type="checkbox"/> Shoreland →	<input type="checkbox"/> Is Property/Land within 300 feet of River, Stream (incl. Intermittent) Creek or Landward side of Floodplain? If yes—continue →	Distance Structure is from Shoreline: _____ feet	Is your Property in Floodplain Zone? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Are Wetlands Present? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	<input checked="" type="checkbox"/> Is Property/Land within 1000 feet of Lake, Pond or Flowage If yes—continue →	Distance Structure is from Shoreline: <u>715</u> feet		
<input checked="" type="checkbox"/> Non-Shoreland				

Value at Time of Completion * include donated time & material	Project	Project # of Stories	Project Foundation	Total # of bedrooms on property	What Type of Sewer/Sanitary System(s) Is on the property or Will be on the property?	Type of Water on property
\$ <u>50,000</u>	<input checked="" type="checkbox"/> New Construction	<input checked="" type="checkbox"/> 1-Story	<input type="checkbox"/> Basement	<input checked="" type="checkbox"/> 1	<input type="checkbox"/> Municipal/City	<input type="checkbox"/> City
	<input type="checkbox"/> Addition/Alteration	<input type="checkbox"/> 1-Story + Loft	<input type="checkbox"/> Foundation	<input type="checkbox"/> 2	<input type="checkbox"/> (New) Sanitary Specify Type: <u>1</u>	<input checked="" type="checkbox"/> Well
	<input type="checkbox"/> Conversion	<input type="checkbox"/> 2-Story	<input checked="" type="checkbox"/> Slab	<input type="checkbox"/> 3	<input checked="" type="checkbox"/> Sanitary (Exists) Specify Type: <u>3 Bed conventional</u>	<input type="checkbox"/>
	<input type="checkbox"/> Relocate (existing bldg)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Privy (Pit) or <input type="checkbox"/> Vaulted (min 200 gallon)	<input type="checkbox"/>
	<input type="checkbox"/> Run a Business on Property	<input type="checkbox"/>	<input checked="" type="checkbox"/> Use	<input type="checkbox"/> None	<input type="checkbox"/> Portable (w/service contract)	<input type="checkbox"/>
	<input checked="" type="checkbox"/> Garage	<input type="checkbox"/>	<input checked="" type="checkbox"/> Year Round	<input type="checkbox"/>	<input type="checkbox"/> Compost Toilet	<input type="checkbox"/>
					<input type="checkbox"/> None	<input type="checkbox"/>

Existing Structure: (if addition, alteration or business is being applied for)	Length: _____	Width: _____	Height: _____
Proposed Construction: (overall dimensions)	Length: <u>36</u>	Width: <u>45</u>	Height: <u>16</u> ?

Proposed Use	✓	Proposed Structure	Dimensions	Square Footage
<input checked="" type="checkbox"/> Residential Use	<input type="checkbox"/>	Principal Structure (first structure on property)	(X)	
	<input type="checkbox"/>	Residence (i.e. cabin, hunting shack, etc.)	(X)	
		with Loft	(X)	
		with a Porch	(X)	
		with (2nd) Porch	(X)	
<input type="checkbox"/> Commercial Use		with a Deck	(X)	
		with (2nd) Deck	(X)	
		with Attached Garage	(X)	
	<input type="checkbox"/>	Bunkhouse w/ (<input type="checkbox"/> sanitary, or <input type="checkbox"/> sleeping quarters, or <input type="checkbox"/> cooking & food prep facilities)	(X)	
	<input type="checkbox"/>	Mobile Home (manufactured date) _____	(X)	
<input type="checkbox"/> Municipal Use	<input type="checkbox"/>	Addition/Alteration (explain) _____	(X)	
	<input checked="" type="checkbox"/>	Accessory Building (explain) <u>Garage</u>	(X)	
	<input type="checkbox"/>	Accessory Building Addition/Alteration (explain) _____	(36 X 45)	1620
	<input type="checkbox"/>	Special Use: (explain) _____	(X)	
	<input type="checkbox"/>	Conditional Use: (explain) _____	(X)	
	<input type="checkbox"/>	Other: (explain) _____	(X)	

FAILURE TO OBTAIN A PERMIT or STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES

I (we) declare that this application (including any accompanying information) has been examined by me (us) and to the best of my (our) knowledge and belief it is true, correct and complete. I (we) acknowledge that I (we) am (are) responsible for the detail and accuracy of all information I (we) am (are) providing and that it will be relied upon by Bayfield County in determining whether to issue a permit. I (we) further accept liability which may be a result of Bayfield County relying on this information I (we) am (are) providing in or with this application. I (we) consent to county officials charged with administering county ordinances to have access to the above described property at any reasonable time for the purpose of inspection.

Owner(s): Bernie Helgeson Barbara Helgeson
(If there are Multiple Owners listed on the Deed All Owners must sign or letter(s) of authorization must accompany this application)

Date 3-10-22

Authorized Agent: _____
(If you are signing on behalf of the owner(s) a letter of authorization must accompany this application)

Date _____

Address to send permit _____

Attach
Copy of Tax Statement

If you recently purchased the property send your Recorded Deed

Original Application MUST be submitted

Back to Tracy - 4-22-2022 - rec'd 4-27-2022 - email Tracy

In the box below: **Draw or Sketch your Property** (regardless of what you are applying for)

Fill Out in Ink – **NO PENCIL**

- (1) Show Location of:

Proposed Construction
- (2) Show / Indicate:

North (N) on Plot Plan
- (3) Show Location of (*):

(*) Driveway and (*) Frontage Road (Name Frontage Road)
- (4) Show:

All Existing Structures on your Property
- (5) Show:

(*) Well (W); (*) Septic Tank (ST); (*) Drain Field (DF); (*) Holding Tank (HT) and/or (*) Privy (P)
- (6) Show any (*):

(*) Lake; (*) River; (*) Stream/Creek; or (*) Pond
- (7) Show any (*):

(*) Wetlands; or (*) Slopes over 20%

Site location of old Proposed Garage Location Not To Be used

Proposed 36x45 Garage

Existing Garage

Existing Cabin 1 Bed

Well

ST

Drain Field 3 Bed System

340'

340'

Private Drive

Property Line

Shared Private Drive

Property Line

Robinson Lk. Rd.

Please complete (1) – (7) above (prior to continuing)

Changes in plans must be approved by the Planning & Zoning Dept.

(8) Setbacks: (measured to the closest point)

Description	Setback Measurements		Description	Setback Measurements
Setback from the Centerline of Platted Road	760 Feet		Setback from the Lake (ordinary high-water mark)	75.5 Feet
Setback from the Established Right-of-Way	665 Feet		Setback from the River, Stream, Creek	- Feet
			Setback from the Bank or Bluff	- Feet
Setback from the North Lot Line	410 Feet			- Feet
Setback from the South Lot Line	340 Feet		Setback from Wetland	- Feet
Setback from the West Lot Line	400 Feet		20% Slope Area on the property	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Setback from the East Lot Line	665 Feet		Elevation of Floodplain	- Feet
Setback to Septic Tank or Holding Tank	190 Feet		Setback to Well	160 Feet
Setback to Drain Field	260 Feet			
Setback to Privy (Portable, Composting)	- Feet			
Prior to the placement or construction of a structure within ten (10) feet of the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner or marked by a licensed surveyor at the owner's expense.				
Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be marked by a licensed surveyor at the owner's expense.				

- (9) Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W).

NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun.
For the Construction Of New One & Two Family Dwelling: **ALL** Municipalities Are Required To Enforce The Uniform Dwelling Code.
The local Town, Village, City, State or Federal agencies may also require permits.

You are responsible for complying with state and federal laws concerning construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the department of natural resources wetlands identification web page or contact a department of natural resources service center (715) 685-2900.

Issuance Information (County Use Only)

Sanitary Number: 21-2185

of bedrooms: 3

Sanitary Date: 12-9-21

Permit Denied (Date):

Reason for Denial:

Permit #: 22-0567

Permit Date: 4-29-2022

Is Parcel a Sub-Standard Lot

☐ Yes (Deed of Record)

☒ No

Is Parcel in Common Ownership

☐ Yes (Fused/Contiguous Lot(s))

☒ No

Is Structure Non-Conforming

☐ Yes

☒ No

Mitigation Required

☐ Yes ☒ No

Mitigation Attached

☐ Yes ☒ No

Affidavit Required

☐ Yes ☒ No

Affidavit Attached

☐ Yes ☒ No

Granted by Variance (B.O.A.)

☐ Yes ☒ No

Case #:

Previously Granted by Variance (B.O.A.)

☐ Yes ☒ No

Case #:

Was Parcel Legally Created

☒ Yes ☐ No

Was Proposed Building Site Delineated

☒ Yes ☐ No

Were Property Lines Represented by Owner

☒ Yes ☐ No

Was Property Surveyed

☐ Yes ☐ No

Inspection Record: Met Landowner

Zoning District: F-3

Lakes Classification: 1/A

Date of Inspection: 4/5/22

Inspected by:

Date of Re-Inspection:

Condition(s): Town, Committee or Board Conditions Attached?

☐ Yes ☐ No – (If No they need to be attached.)

- Not for Human Habitation or sleeping

- If pressurized water enters structure get septic permit

Signature of Inspector:

Date of Approval:

Hold For Sanitary: ☐

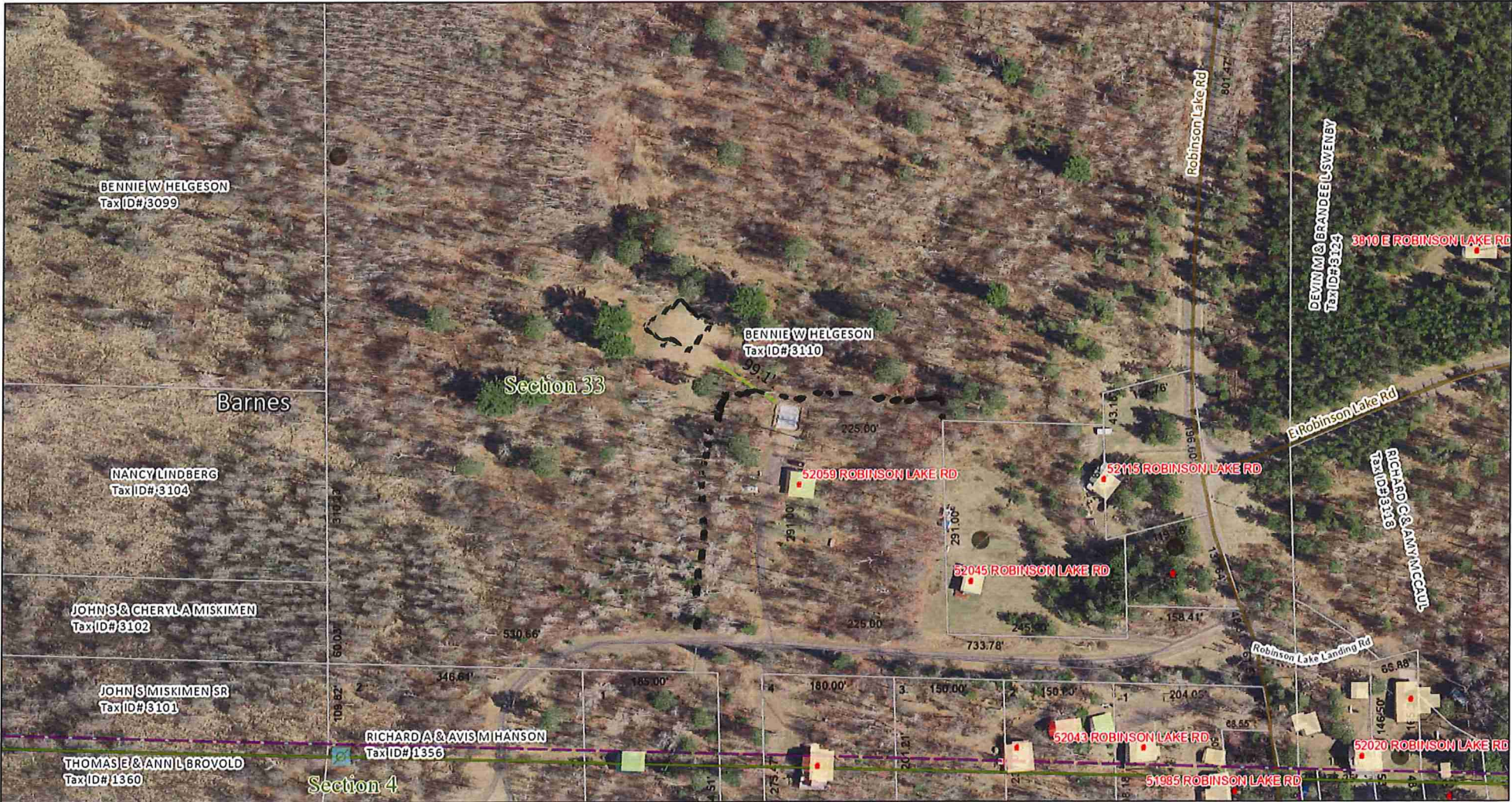
Hold For TBA: ☐

Hold For Affidavit: ☐

Hold For Fees: ☐

☐

Bayfield County, WI



3/28/2022, 3:25:34 PM

- Meander Lines

Approximate Parcel Boundary

Section Lines

Government Lot

Municipal Boundary

All Roads

Town

Private

Survey Maps

UnRecorded Map

Recorded Map

Corner Tie Sheets

Section Corner Monument on File

Building Footprint 2009-2015

Existing

New

Driveways

Buildings
- SPLIT
Line
-
- Bayfield County Land Records Department
<https://maps.bayfieldcounty.wi.gov/BayfieldWAB/>

TOWN OF BARNES TREASURER
JUDY BOURASSA
3360 CO HWY N
BARNES WI 54873

Phone: (715) 795-2782
E-Mail: clerk@barnes-wi.com

STATE OF WISCONSIN - BAYFIELD COUNTY
REAL ESTATE PROPERTY TAX BILL FOR 2020

BENNIE W HELGESON
TOWN OF BARNES

PAYMENTS should reference: **Tax ID: 3110**

DOCUMENT RECORDING, or anything else should reference:
PIN: 04-004-2-45-09-33-4 03-000-10000

Alternate/Legacy ID: 004-1216-04 000

Ownership: BENNIE W HELGESON

Important: Be sure this description covers your property. Note that this description is for tax bills only and may not be a full legal description. See reverse side for important information.

Property Description / Location of Property

Site Address: 52059 ROBINSON LAKE RD

Description: Sec 33 Tn 45 Rg 09 SW SE LESS 1 A IN V.163 P.319; V.217 P.324; V.249 P.240; V.254 P.490; V.317 P.308 LESS CSM V.5 P.250 (SUB TO E V.743 P.257 & V. 795 P. 866 & V. 795 P. 866 &

BENNIE W HELGESON
N7649 HWY 128
SPRING VALLEY WI 54767

Please include self-addressed, stamped envelope for return receipt.
Please inform your treasurer of any billing address changes.

Acreage: 0.000

Document: 2009R-529674-1029-168

Assessed Value			Average Assessment Ratio	Net Assessed Value		Real Estate Tax:	
Land	Improved	Total		Rate (Does NOT reflect lottery or first dollar credit) 0.009640403		First Dollar Credit:	1,193.48
\$67,400	\$56,400	\$123,800	0.98926			Lottery Credit:	-21.43
Estimated Fair Market Value			An "X" means unpaid prior year taxes. <input type="checkbox"/>	School taxes reduced by school levy tax credit. \$77.19		Net Real Estate Tax:	-0.00
Land	Improved	Total				Total Due:	1,172.05
\$68,100	\$57,000	\$125,100			For full payment pay to TOWN OF BARNES treasurer by January 31, 2021		
Estimated State Aids Allocated Tax District			Net Tax		% Tax Change		Warning If not paid by due dates, installment option is lost and total tax is delinquent and subject to interest and if applicable, penalty. (See reverse)
Taxing Jurisdiction	2019	2020	2019	2020			
STATE	0	0	0.00	0.00	0.0		
COUNTY	125,109	125,995	569.62	533.37	-6.4		
TOWN OF BARNES	400,216	400,212	312.19	312.74	0.2		
SCHL-DRUMMOND	246,387	198,600	312.72	300.50	-3.9		
TECHNICAL COLLEGE	290,223	261,719	50.14	46.87	-6.5		
Totals	1,061,935	986,526	1,244.67	1,193.48	-4.1		
First Dollar Credit			21.24	21.43	0.9		
Lottery & Gaming Credit			0.00	0.00	0.0		
Net Property Tax			1,223.43	1,172.05	-4.2		

Paid 12-11-20 #674

*4125.08
9.65
1,181.70
Total*

Pay 2nd Installment Of: **586.02**
by **July 31, 2021**

Amount enclosed:

BENNIE W HELGESON
Tax ID: 3110 (004)

Make payment payable and mail to:
BAYFIELD COUNTY TREASURER
DANIEL ANDERSON
PO BOX 397
WASHBURN WI 54891

Include this stub with your payment
Or to Pay Online see Credit
Card Payments on back

RECEIVED

MAR 16 2022

Bayfield Co.
Planning and Zoning Agency

Town, City, Village, State or Federal
Permits May Also Be Required

LAND USE – **X**
SANITARY –
SIGN –
SPECIAL –
CONDITIONAL –
BOA –

BAYFIELD COUNTY
PERMIT

**WEATHERIZE AND POST THIS PERMIT
ON THE PREMISES DURING CONSTRUCTION**

No. **22-0067** Issued To: **Bennie Helgeson**

Part of

Location: **SW** ¼ of **SE** ¼ Section **33** Township **45** N. Range **9** W. Town of **Barnes**
LESS 1 A IN V.163 P.319; V.217 P.324; V.249 P.240; V.254 P.490; V.317 P.308 LESS CSM V.5 P.250 (SUB TO E V.743 P.257 & V. 795 P. 866 & V. 803 P. 114)

Gov't Lot	Lot	Block	Subdivision	CSM#
-----------	-----	-------	-------------	------

Residential Accessory Structure:

For: **[1- Story]; Garage (36' x 45') = 1,620 sq. ft.; at a Height of 16'**

(Disclaimer): Any future expansions or development would require additional permitting.

Condition(s): Build as proposed. Not for Human Habitation or Sleeping. If pressurized water enters structure get septic permit.

You are responsible for complying with state and federal laws concerning construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the department of natural resources wetlands identification web page or contact a department of natural resources service center (715) 685-2900.

NOTE: This permit expires one year from date of issuance if the authorized construction work or land use has not begun.

Changes in plans or specifications shall not be made without obtaining approval. This permit may be void or revoked if any of the application information is found to have been misrepresented, erroneous, or incomplete.

This permit may be void or revoked if any performance conditions are not completed or if any prohibitory conditions are violated.

Tracy Pooler, AZA

Authorized Issuing Official

April 29, 2022

Date

SUBMIT: COMPLETED APPLICATION, TAX STATEMENT AND FEE TO:
Bayfield County
Planning and Zoning Depart.
PO Box 58
Washburn, WI 54891
(715) 373-6138

APPLICATION FOR PERMIT
BAYFIELD COUNTY, WISCONSIN



Permit #:	22-5566
Date:	4-29-2022
Amount Paid:	\$900 Res 3-23-22 fig
Refund:	TBA 12-9-21 fig

INSTRUCTIONS: No permits will be issued until all fees are paid.
Checks are made payable to: Bayfield County Zoning Department.

DO NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO APPLICANT. Original Application MUST be submitted FILL OUT IN INK (NO PENCIL)

TYPE OF PERMIT REQUESTED → <input checked="" type="checkbox"/> LAND USE <input type="checkbox"/> SANITARY <input type="checkbox"/> PRIVY <input type="checkbox"/> CONDITIONAL USE <input type="checkbox"/> SPECIAL USE <input type="checkbox"/> B.O.A. <input type="checkbox"/> OTHER	
Owner's Name: Bennie Helgeson	Mailing Address: 52059 Robinson Lake Rd. City/State/Zip: Barnes WI 54873 Telephone: (715) 495-1269
Address of Property: 52059 Robinson Lake Rd.	City/State/Zip: Barnes WI, 54873 Cell Phone:
Contractor: Justin Christenson	Contractor Phone: (715) 580-0367 Plumber: for Septic Bennie Helgeson Plumber Phone: (715) 495-1269
Authorized Agent: (Person Signing Application on behalf of Owner(s))	Agent Phone: Agent Mailing Address (include City/State/Zip): Written Authorization Attached <input type="checkbox"/> Yes <input type="checkbox"/> No
PROJECT LOCATION: SW 1/4, SE 1/4	Legal Description: (Use Tax Statement) Tax ID# 3110 Recorded Document: (Showing Ownership) 2009R 529615
Gov't Lot Lot(s) CSM Vol & Page CSM Doc # Lot(s) # Block #	Subdivision:
Section 33, Township 45 N, Range 9 W	Town of: Barnes Lot Size Acreage 34

<input type="checkbox"/> Shoreland →	<input type="checkbox"/> Is Property/Land within 300 feet of River, Stream (incl. Intermittent) Creek or Landward side of Floodplain? If yes—continue →	Distance Structure is from Shoreline : feet	Is your Property in Floodplain Zone? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Are Wetlands Present? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	<input checked="" type="checkbox"/> Is Property/Land within 1000 feet of Lake, Pond or Flowage If yes—continue →	Distance Structure is from Shoreline : 730 feet		
<input checked="" type="checkbox"/> Non-Shoreland				

Value at Time of Completion * include donated time & material	Project	Project # of Stories	Project Foundation	Total # of bedrooms on property	What Type of Sewer/Sanitary System(s) Is on the property or Will be on the property?	Type of Water on property
\$ 300,000	<input checked="" type="checkbox"/> New Construction	<input checked="" type="checkbox"/> 1-Story	<input type="checkbox"/> Basement	<input type="checkbox"/> 1	<input type="checkbox"/> Municipal/City	<input type="checkbox"/> City
	<input type="checkbox"/> Addition/Alteration	<input type="checkbox"/> 1-Story + Loft	<input type="checkbox"/> Foundation	<input type="checkbox"/> 2	<input checked="" type="checkbox"/> (New) Sanitary Specify Type: 3 Bed conventional	<input checked="" type="checkbox"/> Well
	<input type="checkbox"/> Conversion	<input type="checkbox"/> 2-Story	<input checked="" type="checkbox"/> Slab	<input checked="" type="checkbox"/> 3	<input checked="" type="checkbox"/> Sanitary (Exists) Specify Type: 3 Bed conventional	<input type="checkbox"/>
	<input type="checkbox"/> Relocate (existing bldg)			<input type="checkbox"/>	<input type="checkbox"/> Privy (Pit) or <input type="checkbox"/> Vaulted (min 200 gallon)	
	<input type="checkbox"/> Run a Business on Property		Use <input checked="" type="checkbox"/> Year Round	<input type="checkbox"/> None	<input type="checkbox"/> Portable (w/service contract)	
	<input checked="" type="checkbox"/> House				<input type="checkbox"/> Compost Toilet	
					<input type="checkbox"/> None	

Existing Structure: (if addition, alteration or business is being applied for)	Length: 50	Width: 40	Height: 14 ?
Proposed Construction: (overall dimensions)	Length: 50	Width: 40	Height: 14 ?

Proposed Use	✓	Proposed Structure	Dimensions	Square Footage
<input checked="" type="checkbox"/> Residential Use	<input checked="" type="checkbox"/>	Principal Structure (first structure on property)	(40 X 40)	1600
	<input type="checkbox"/>	Residence (i.e. cabin, hunting shack, etc.)	(X)	
		with Loft	(X)	
		with a Porch	(10 X 24)	240
		with (2nd) Porch	(X)	
<input type="checkbox"/> Commercial Use		with a Deck	(X)	
		with (2nd) Deck	(X)	
<input type="checkbox"/> Municipal Use		with Attached Garage	(X)	
	<input type="checkbox"/>	Bunkhouse w/ (<input type="checkbox"/> sanitary, or <input type="checkbox"/> sleeping quarters, or <input type="checkbox"/> cooking & food prep facilities)	(X)	
	<input type="checkbox"/>	Mobile Home (manufactured date)	(X)	
	<input type="checkbox"/>	Addition/Alteration (explain)	(X)	
	<input type="checkbox"/>	Accessory Building (explain)	(X)	
	<input type="checkbox"/>	Accessory Building Addition/Alteration (explain)	(X)	
	<input type="checkbox"/>	Special Use: (explain)	(X)	
	<input type="checkbox"/>	Conditional Use: (explain)	(X)	
	<input type="checkbox"/>	Other: (explain)	(X)	

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Owner(s): Barbara Helgeson Date: 3-10-22
(If there are Multiple Owners listed on the Deed ALL Owners must sign or letter(s) of authorization must accompany this application)

Authorized Agent: Date:
(If you are signing on behalf of the owner(s) a letter of authorization must accompany this application)

Address to send permit: Attach Copy of Tax Statement
If you recently purchased the property send your Recorded Deed

Original Application MUST be submitted

Back to Tracy - 4-22-2022 - rec'd 4-27-22 - email Tracy(ZD)

Fill Out in Ink – **NO PENCIL**

-
- Proposed 40x40 House
- Proposed 36x45 Garage
- New Septic Location →
- Proposed Well
- Potential Split Line
- Existing Garage
- Existing 1 Bedroom Cabin
- S.T.
- Existing 3 Bed Septic System
- 52059
- Private Drive
- Property Line
- Robinson L.K. Rd.
- Please complete (1) – (7) above (prior to continuing)
- (9) Setbacks: (measured to the closest point)
- Changes in plans must be approved by the Planning & Zoning Dept.

Changes in plans must be approved by the Planning & Zoning Dept.

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©©August 2017

175⁰⁰

TOWN BOARD RECOMMENDATION - - (CLASS A)

ENTERED

When **Town Board** has completed this form, please mail to:

Bayfield County Planning and Zoning Department
 P.O. Box 58 – Washburn, WI 54891
 Phone – (715) 373-6138
 Fax – (715) 373-0114
 e-mail: zoning@bayfieldcounty.org

Website:
www.bayfieldcounty.org/147

Date Zoning Received (Stamp Here)

DEC 28 2021

Bayfield Co.
 Planning and Zoning Agency

Property Owner(s) are responsible to give this form to the Town Clerk. **Attach a copy of the County Application (8 1/2 x 14) [front/back].** This is a Class A special use request. **Note:** The Town's Planning Commission meets prior to the Town. Once the Town meets they will forward their recommendation to the Planning and Zoning Department. **Ask Town if you should be present at their meeting(s).**

Property Owner Bennie Helgeson Contractor American Homes Flayward
 Property Address 52059 Robinson Lake Rd Authorized Agent Michelle Christian
Barnes WI, 54873 Agent's Telephone (715) 634-5222
 Telephone (715) 495-1269 Written Authorization Attached: Yes () No (✓)

Accurate Legal Description involved in this request (specify only the property involved with this application)

SW 1/4 of SE 1/4, Section 33, Township 45 N., Range 9 W. Town of Barnes

Govt. Lot _____ Lot _____ Block _____ Subdivision _____ CSM# _____

Volume _____ Page _____ of Deeds Tax I.D.# 3110 Acreage 34

Additional Legal Description: _____

Applicant: (State what you are asking for) To build a house and Garage In Zoning District: _____ Lakes Classification: _____
a (F1) Zoning at 52059 Robinson Lake Rd.

We, the Town Board, TOWN OF Barnes, do hereby recommend to

☐ Table

☒ Approval

☐ Disapproval

Have you reviewed this for Compatibility with the Comprehensive and/or Land Use Plan: ☒ Yes ☐ No

Township: (In detail clearly state Town Board's reason for recommendation of tabling, approval or disapproval)

Subdivider ok, paperwork in order

** THE FOLLOWING **MUST** BE INCLUDED WITH THIS FORM:

1. The Tabled, Approval or Disapproval box checked
2. The Town's reasoning for the tabling, approval or disapproval
3. The form returned to Zoning Department **not a copy or fax**

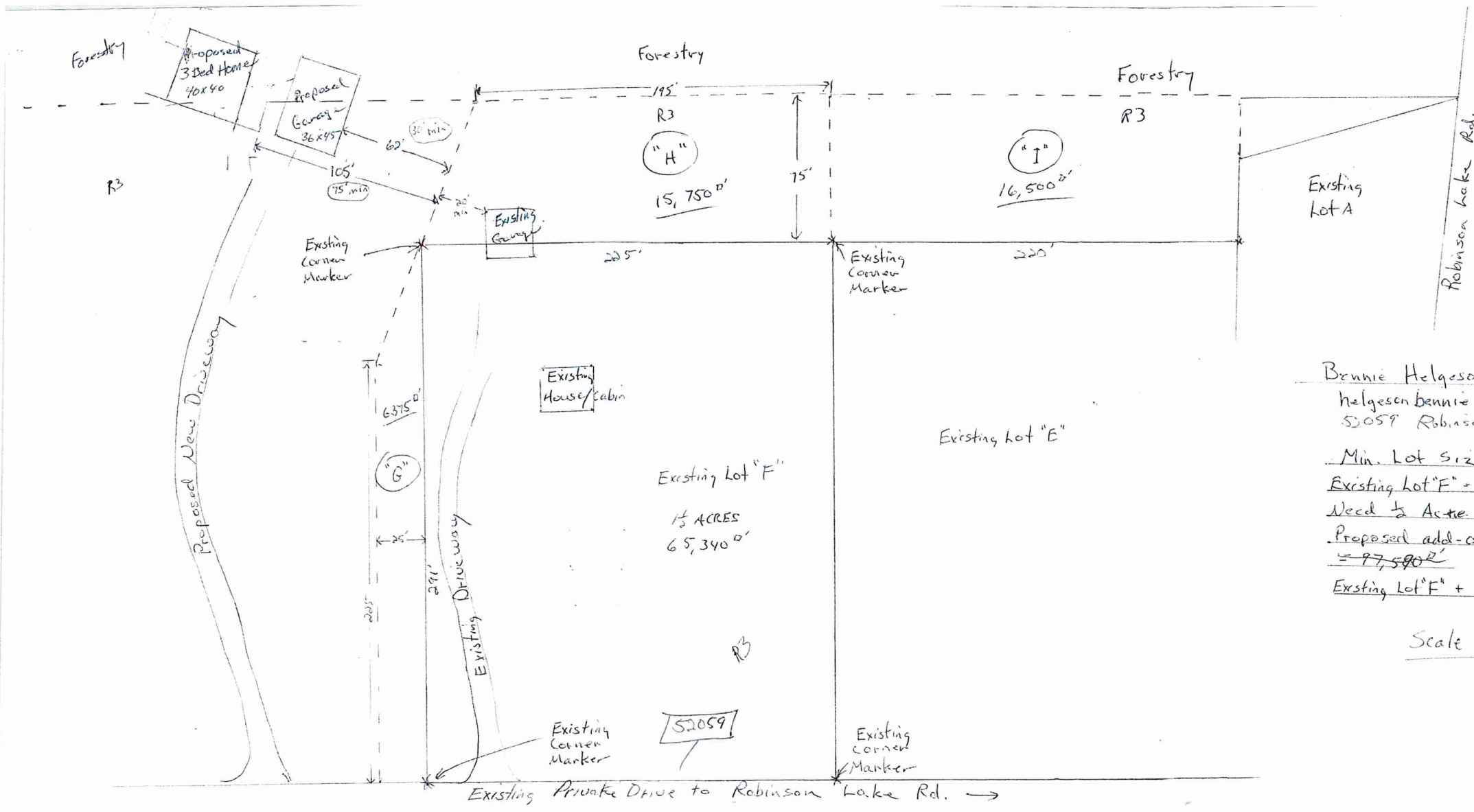
** NOTE:

Receiving Town Board approval, **does not** allow the start of construction or business, you **must** first obtain your permit card(s) from the Planning and Zoning Department.

Revised: November 2017

Signed:

Chairman: [Signature]Supervisor: [Signature]Supervisor: [Signature]Supervisor: [Signature]Clerk: [Signature]Date: 12/21/2021



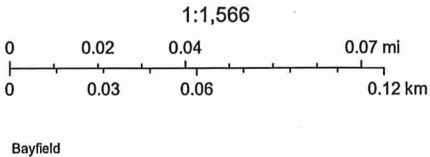
Bennie Helgeson (715) 495-1269
 helgesonbennie@gmail.com
 52059 Robinson Lake Rd. Barnes WI.
 Min. Lot Size 2 Acres = 87,120 sq ft
 Existing Lot "F" = 1 1/2 Acres = 65,340 sq ft
 Need 1/2 Acre more = 21,780 sq ft
 Proposed add-on to Lot "F" ("H" + "I" = 32,250 sq ft)
 = 97,590 sq ft or
 Existing Lot "F" + "G" + "H" = 87,465 sq ft
 Scale 1" = 40'

Bayfield County, WI



3/28/2022, 3:25:34 PM

- | | | | |
|-----------------------------|--------------------|---------------------------------|------------------------------|
| Meander Lines | Municipal Boundary | Survey Maps | Building Footprint 2009-2015 |
| Approximate Parcel Boundary | All Roads | UnRecorded Map | Existing |
| Section Lines | Town | Recorded Map | New |
| Government Lot | Private | Corner Tie Sheets | Driveways |
| | | Section Corner Monument on File | Buildings |



SA 17
line
90

TOWN OF BARNES TREASURER
JUDY BOURASSA
3360 CO HWY N
BARNES WI 54873

Phone: (715) 795-2782
E-Mail: clerk@barnes-wi.com

STATE OF WISCONSIN - BAYFIELD COUNTY
REAL ESTATE PROPERTY TAX BILL FOR 2020

BENNIE W HELGESON
TOWN OF BARNES

RECEIVED

MAR 16 2022

Bayfield Co.
Planning and Zoning Agency

BENNIE W HELGESON
N7649 HWY 128
SPRING VALLEY WI 54767

PAYMENTS should reference: **Tax ID: 3110**

DOCUMENT RECORDING, or anything else should reference:

PIN: 04-004-2-45-09-33-4 03-000-10000

Alternate/Legacy ID:

004-1216-04 000

Ownership: BENNIE W HELGESON

Important: Be sure this description covers your property. Note that this description is for tax bills only and may not be a full legal description. See reverse side for important information.

Property Description / Location of Property

Site Address: 52059 ROBINSON LAKE RD

Description: Sec 33 Tn 45 Rg 09 SW SE LESS 1 A IN V.163 P.319; V.217 P.324; V.249 P.240; V.254 P.490; V.317 P.308 LESS CSM V.5 P.250 (SUB TO E V.743 P.257 & V. 795 P. 866 & V. 795 P. 866 &

Please include self-addressed, stamped envelope for return receipt.

Please inform your treasurer of any billing address changes.

Acreage: 0.000

Document: 2009R-529674-1029-168

Assessed Value			Average Assessment Ratio	Net Assessed Value Rate (Does NOT reflect lottery or first dollar credit) 0.009640403	Real Estate Tax: 1,193.48	
Land	Improved	Total			First Dollar Credit:	-21.43
\$67,400	\$56,400	\$123,800	0.98926		Lottery Credit:	-0.00
Estimated Fair Market Value			An "X" means unpaid prior year taxes. <input type="checkbox"/>	School taxes reduced by school levy tax credit. \$77.19	Net Real Estate Tax: 1,172.05	
Land	Improved	Total			Total Due: 1,172.05	
\$68,100	\$57,000	\$125,100			For full payment pay to TOWN OF BARNES treasurer by January 31, 2021	
Taxing Jurisdiction		Estimated State Aids Allocated Tax District		Net Tax		% Tax Change
		2019	2020	2019	2020	
STATE		0	0	0.00	0.00	0.0
COUNTY		125,109	125,995	569.62	533.37	-6.4
TOWN OF BARNES		400,216	400,212	312.19	312.74	0.2
SCHL-DRUMMOND		246,387	198,600	312.72	300.50	-3.9
TECHNICAL COLLEGE		290,223	261,719	50.14	46.87	-6.5
Totals		1,061,935	986,526	1,244.67	1,193.48	-4.1
First Dollar Credit				21.24	21.43	0.9
Lottery & Gaming Credit				0.00	0.00	0.0
Net Property Tax				1,223.43	1,172.05	-4.2

Warning If not paid by due dates, installment option is lost and total tax is delinquent and subject to interest and if applicable, penalty. (See reverse)

4125.08
2.65

1,181.70
Total

Pay 2nd Installment Of: 586.02

by July 31, 2021

Amount enclosed:

BENNIE W HELGESON
Tax ID: 3110 (004)

Make payment payable and mail to:
BAYFIELD COUNTY TREASURER
DANIEL ANDERSON
PO BOX 397
WASHBURN WI 54891

Include this stub with your payment
Or to Pay Online see Credit
Card Payments on back

Town, City, Village, State or Federal
Permits May Also Be Required

LAND USE – **X (After-the-Fact)**
SANITARY –
SIGN –
SPECIAL –
CONDITIONAL –
BOA –

BAYFIELD COUNTY
PERMIT

WEATHERIZE AND POST THIS PERMIT
ON THE PREMISES DURING CONSTRUCTION

No. **22-0066** Issued To: **Bennie Helgeson**

Part of
Location: **SW** ¼ of **SE** ¼ Section **33** Township **45** N. Range **9** W. Town of **Barnes**
LESS 1 A IN V.163 P.319; V.217 P.324; V.249 P.240; V.254 P.490; V.317 P.308 LESS CSM V.5 P.250 (SUB TO E V.743 P.257 & V. 795 P. 866 & V. 795 P. 866 & V. 803 P. 114)

Gov't Lot	Lot	Block	Subdivision	CSM#
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(After-the-Fact) Residential Accessory:
For: **[1- Story]; Residence (40' x 40') = 1,600 sq. ft.; with Porch (10' x 24') = (240 sq. ft.) at a Height of 14'**
(Disclaimer): Any future expansions or development would require additional permitting.

Condition(s): Build as proposed. Get required UDC inspections. Must meet and maintain setbacks.

You are responsible for complying with state and federal laws concerning construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the department of natural resources wetlands identification web page or contact a department of natural resources service center (715) 685-2900.

NOTE: This permit expires one year from date of issuance if the authorized construction work or land use has not begun.

Changes in plans or specifications shall not be made without obtaining approval.
This permit may be void or revoked if any of the application information is found to have been misrepresented, erroneous, or incomplete.

This permit may be void or revoked if any performance conditions are not completed or if any prohibitory conditions are violated.

Tracy Pooler, AZA

Authorized Issuing Official

April 29, 2022

Date